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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

OFFICIAL

In re Application of:)
Joseph C. Salamone, et al.)
) Examiner: K. L. Peng
Serial No.: 10/003,635)
) Art Unit: 1712
Filed: November 2, 2001)
) Docket No.: P02866
Title: HIGH REFRACTIVE INDEX POLYMERIC)
SILOXYSILANE COMPOSITIONS)

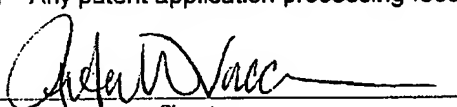
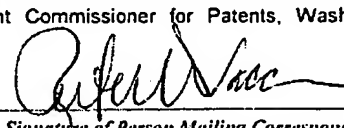
Response to Office Action Final Rejection mailed September 23, 2003

Commissioner of Patents and Trademarks
Washington, D.C. 20231

AMENDMENT AFTER FINAL

Honorable Sir:

In response to the Office Action mailed September 23, 2003 regarding the above-identified application, enclosed find a Petition requesting an extension of time for response within the second month. Applicants also respectfully request reconsideration and allowance of pending claims 7-13 and 19-28 based on the following amendments and remarks.

AMENDMENT TRANSMITTAL LETTER (Large Entity)				Docket No. P02866	
Applicant(s): JOSEPH C. SALAMONE ET AL.					
Serial No. 10/003,635	Filing Date NOVEMBER 2, 2001	Examiner K. L. PENG		Group Art Unit 1712	
Invention: HIGH REFRACTIVE INDEX POLYMERIC SILOXYSILANE COMPOSITIONS				RECEIVED CENTRAL FAX CENTER FEB 05 2004 OFFICIAL	
<u>TO THE ASSISTANT COMMISSIONER FOR PATENTS:</u>					
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	17 -	20 =	0 x	\$18.00	\$0.00
INDEP. CLAIMS	1 -	3 =	0 x	\$78.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00
<div style="display: flex; justify-content: space-between;"><div><input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ A duplicate copy of this sheet is enclosed. <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 02-1425 A duplicate copy of this sheet is enclosed. <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.</div><div style="text-align: right;">Dated: FEBRUARY 5, 2004</div></div> <div style="display: flex; justify-content: space-between; margin-top: 20px;"><div> _____ Signature RITA D. VACCA, REG. NO. 33,624 BAUSCH & LOMB INCORPORATED ONE BAUSCH & LOMB PLACE ROCHESTER, NEW YORK 14604-2701</div><div style="border: 1px solid black; padding: 5px; width: 30%; text-align: center;"><div>I certify that this document and fee is being deposited on FEB. 5, 2004 with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231.  _____ Signature of Person Mailing Correspondence RITA D. VACCA _____ Typed or Printed Name of Person Mailing Correspondence</div></div></div> <div style="margin-top: 20px;">CC:</div>					

P11LARGE/REV06